OFFICE OF COMMISSIONER OF INSURANCE

COMMISSIONER OF INSURANCE • INDUSTRIAL LOAN COMMISSIONER • SAFETY FIRE COMMISSIONER

Ralph T. Hudgens, Commissioner

2 Martin Luther King Jr., Dr., Suite 604, West Tower, Atlanta, GA 30334

Phone: 404-656-7556 ◊ Fax: 770-344-5798 ◊ E-mail: TBrewster@oci.ga.gov

www.oci.ga.gov

Application For Renewal License As A Pre-Paid Legal Service Sponsor

NON-TRADITIONAL LIMITED RISK ENTITIES GID-033-NT JAN2014

To the Commissioner of Insurance, State of Georgia:

Sponsor Name: _____

Address: _____

Note: The name and address of the sponsor as it appears above shall be the same as it presently appears on your license. If any of this information is incorrect, fill in the correct information in the space provided below:

_____

_____

_____

1. This is a renewal of license number _____ for the year _____

2. (a) If this is a corporation, give name and address: _____

_____

_____

(b) Give names of Officers: President _____
Secretary _____
Treasurer _____

3. If this is partnership or proprietorship, give names of partners or proprietor:

_____

4. Attach a check, payable to the Georgia Insurance Department-Regulatory Services/Enforcement, in the amount of $500.00 for annual license fee.

ADDRESS TO REMIT BY MAIL:
Georgia Dept. of Insurance-Regulatory Services/Enforcement, P.O. Box 935138, Atlanta, GA 31193-5138
ADDRESS TO REMIT BY COURIER:
Wells Fargo Bank
Georgia Dept. of Insurance-Regulatory Services/Enforcement, Lockbox 935138, 3585 Atlanta Ave., Hapeville, GA 30354

Effective, 1-1-2012, the Citizenship Affidavit Form GID-276-EN must be submitted with this application for processing.

AFFIDAVIT

State _____ **County** _____

_____ , the undersigned, being the

_____ , of the
(Title, if a corporation)

_____
(Name of the prepaid legal services sponsor)

swear, or affirm, that to the best of my knowledge and belief, the statements contained in this application, including the accompanying statements (if any), are true and complete.

BY _____

Subscribed and sworn to before me this _____ day of _____ , _____

(SEAL)

_____
(Notary Public)

_____
Commission Expiration Date